

#### WHAT IS THE STEP GRANT?

The Delaware Department of State's Export Team, through a partnership with the U.S. Small Business Administration (SBA), offers eligible Delaware businesses grants to assist in expanding their export businesses. Grant recipients may use these funds to cover up to 50% of all pre-approved, eligible, export marketing expenses up to a **maximum of \$7,000** for grant award FY2019 per company. Delaware businesses are permitted to participate in two STEP trade missions per country in addition to receiving the \$7,000 maximum of STEP reimbursable funds.

#### **ELIGIBLE EXPENSES**

All submitted expenses must be pre-approved in your funding application by the Delaware Department of State. Delaware reimburses up to 50% of the following pre-approved eligible expenses for one traveler per company:

- Airfare (consistent with Fly America Rules<sup>1</sup>, must be pre-approved)
- Ground transportation fees
- Baggage fees
- Parking fees
- Lodging (according to federal foreign per diem rates<sup>2</sup>, must be pre-approved)
- Registration fees and booth space for trade shows
- Trade mission fees (U.S. Department of Commerce)
- Currency exchange fees
- Fees for shipping sample products (capped at \$2,000)
- Cost of compliance testing an existing product for entry into an export market (capped at \$3,000)
- Export research tool subscription used to assist STEP Clients with market research (capped at \$1,000 per award year)
- Website translation into foreign language, search engine optimization, and localization services (capped at \$3,000);
- Design of marketing media (capped at \$3,000) commensurate with STEP's statutory objectives deemed appropriate and approved in advance by SBA
- Export conferences, meetings, symposium or training programs that pertain to STEP's statutory objectives deemed appropriate and **approved in advance by SBA**

#### WHAT COMPANIES ARE ELIGIBLE?

- Business must have operations in Delaware. Those companies incorporated in Delaware without operations here are not eligible for Delaware STEP Grants.
- Applicant must be a U.S. citizen.
- Product must be made in the USA there is a 51% U.S. content requirement.
- Companies must meet SBA size standards for eligibility, which vary by NAICS code and type of business. Please verify before completing the application<sup>3</sup>
- Companies must be in business for no less than a one-year period ending on the date on which assistance is provided under the STEP grant.





- Company must have demonstrated understanding of the costs associated with exporting and doing business with foreign producers, including costs of freight forwarding, customs brokers, packing and shipping.
- Company must have a strategic export plan in effect.
- Accounting, Legal, and Technical Service Firms may be eligible provided they have international clientele, and can prove the intent to expand their business of exporting professional services.

#### APPLICATION PROCEDURE

- Please complete the STEP Grant Application and email to the Delaware Department of State.
- All applicants meeting initial criteria will be interviewed by the Department of State.
- Your application will be reviewed and, if approved, you will receive notification via email of your approved status, effective date and award amount within two weeks.

Please do NOT incur any expenses for which you will be seeking reimbursement prior to Department of State approval as grants cannot be used to reimburse costs retroactively.

#### REIMBURSEMENT PROCEDURE

The following documents must be submitted to the Department of State for reimbursement:

- 1. Scans of all receipts
- 2. Itemized Worksheet (template provided by Department of State)
- 3. Invoice

#### **EVALUATION AND SALES REPORTS**

Companies will be contacted by the Delaware Department of State team to learn of the successes achieved with the help of this grant. Companies receiving grants agree to provide the State with confidential information in follow up to the mission such as: number of leads received, business under negotiation and/or sales achieved and Delaware jobs created or retained as a result of the respective trade activities for which funding was granted.

The State of Delaware is required by SBA as a condition of its funding for this program to provide feedback on all activity. This data will be collected three times during the award period – immediately following activity, and in October/March of the program year. A 24-month survey will be conducted the following fiscal year in October/March.

Recipients of SBA grants acknowledge that their cooperation in this regard is a contingency of such funding. The State of Delaware appreciates your cooperation, and it is essential to our ongoing success in winning and administering SBA grants on behalf of Delaware businesses.

<sup>&</sup>lt;sup>3</sup> SBA size standards for eligibility <a href="https://www.sba.gov/managing-business/running-business/size-standards">https://www.sba.gov/managing-business/running-business/size-standards</a>



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<sup>&</sup>lt;sup>1</sup>Fly America Rules: http://www.gsa.gov/portal/content/103191

<sup>&</sup>lt;sup>2</sup>Federal foreign per diem rates: <a href="https://aoprals.state.gov/web920/per\_diem.asp">https://aoprals.state.gov/web920/per\_diem.asp</a>



### **APPLICATION**

Download the application and save it on your computer <u>before</u> completing and remember to save your work periodically as you complete the form.

### **ELIGIBILITY**

Does your company meet the SBA size standard? Yes No

See: <a href="https://www.sba.gov/managing-business/running-business/size-standards">https://www.sba.gov/managing-business/running-business/size-standards</a>

If you answered "No", STOP here and contact the Delaware Department of State for additional information.

CONTACT INFORMATION  Please include primary and secondary (if applicable) contact information here.						
Company Name		Trade Name/DBA				
Address Line 1						
Address Line 2						
City		State	Zip Code			
Website						
Primary Contact						
First Name		Last Name				
Job Title						
Direct Phone	Ext.	Cell Phone				
Email						
Secondary Contact						
First Name		Last Name				
Job Title						
Direct Phone	Ext.	Email				



#### **COMPANY INFORMATION**

For reporting purposes, please advise if company ownership identifies with any of the following groups. Ownership is defined as an individual who owns not less than 51% of the firm.

Black American Rural

Hispanic American Service disabled veteran

Native American Veteran

Asian Pacific Americans Woman

**Subcontinent Asian Americans** 

Other minority group as defined by the federal government; please describe:

(No export experience at all; only "accidental" or "novice" exporting experience; no export Are you: New to Export?

experience within 24 months.)

Market Expansion? (Currently exporting to one or more markets and are seeking to expand into new country market(s);

or expand into a new region or new segment or new product line within an existing market.)

NAICS code: **HS Codes:** 

Describe the product/services you intend to export and their positioning (i.e. price vs. quality vs. value).

How are you currently selling these products to customers in the U.S.? (e.g. in-house sales force, commission agents, distributor/wholesaler/retailer channels, direct to end-users, internet/online sales, specialty/other).

Describe your target export markets/customers and your "unique selling proposition" for each.





Total number of employees	Total number i	n Delawa	are	
Annual Sales	Currently Expo	rt	Yes	No
Current Export Sales	Export Sales Go	oal for N	ext Year	
% of Total Sales from Export	Years of Export	Experie	nce	
From which countries have you had inquiries about potential international sales?				
Do you currently have an export plan?	Yes	No		
To which countries do you currently export?				
Do you have a country or region of interest for growth	or expansion?			
What do you see as your company's key challenges to e	ovnorting/intorn	ational c	aloc?	
what do you see as your company's key chanenges to e	exporting/interna	ational S	ales:	
What are your company's three top export challenges,	in order of prior	itv? (i a	#1 #2 #3\	
what are your company 3 times top export challenges,	in order or prior	ity: (i.e.	π±, π∠, #3	

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**Are you interested in participating in a trade mission with the State of Delaware?** If so, please indicate the initiative for which you are interested in applying for funds.

Please check all that apply and indicate the type(s) of contacts you would like for each (i.e. Representative; Licensee/Franchisee; Wholesaler; Distributor; Retailer; Joint Venture Partner; Direct Sales; Other/not sure, please specify).

isidei
France
UK (Supplier Diversity Focus)
Chile/Peru
Philippines
Sweden/Denmark
Independent Export Initiative (please explain below)

Please attach a separate note if you have any additional information for any of your target markets, such as direct competitors you know of in that market, complimentary products offered by target customers, companies you'd like to be put in contact with (or NOT to be contacted) and why, and any clarifying information about your ideal contact (e.g. you believe that warehousing or service capabilities are key).

If you are applying for an Independent Export Initiative that you wish to conduct on your own, please describe below. If applying for a trade show or business trip, please indicate the dates.

Please provide an estimate of the funds you need to support this trip in the itemized format below. **This information is required and determines how much you will be awarded.** You will be awarded no more than 50% of your eligible expenses.

Destination and Dates: (List dates of travel in each city)	
Estimated Misc. Expenses: (Trade show booth, airport parking, in-country transportation, baggage fe	es)
Estimated Hotel Cost:	



**Estimated Flight Cost:** 



Any Delaware company accepted to participate in a trade mission with the State of Delaware shall reimburse the State for all costs incurred on the company's behalf in the event the company fails to participate in the trade mission.

I hereby certify that all information provided in this document, as well as any accompanying documents, are true and complete.

My signature below confirms that my company complies with Buy American laws and Hire American requirements of Executive Order 13788.

Signature		
Full Name		
Job Title		
Date		

The US Small Business Administration (SBA) would like to give eligible small business concerns the opportunity to expand your knowledge and resources of other programs that are offered by the agency. Please check the appropriate box if you would like your company's name and contact information to be shared with other SBA programs. Your choice to participate or not will not change the status of your participation with STEP. SBA's aim is strictly to share information about other opportunities with you

Yes No